



# Restorative Justice Louisville, Inc.

514 West Liberty Street, Suite 106  
Louisville, KY 40202-2324  
Phone: 502 574-6869  
Fax: 502 574-5299

## Referral Form

Please send all referrals to Libby Mills c/o Restorative Justice Louisville

Date of Request: 7/31/14 Case Number: 343543  
Referring Agency: Jefferson Co. CDW Office Restitution Amount: \_\_\_\_\_  
Person Referring: Ashley Snow  
Phone Number: 595-0036 Diversion End Date: 1/30/15

Please include any of the applicable items: citation, victim statement, statement of loss, teacher statement, complaint or any other pertinent information

### Victim Information (use additional forms for multiple victims)

Name: Unknown  
Address: 9108 Old Six Mile Ln  
Home Number: \_\_\_\_\_ Cell Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Male ☐ Female ☐ Date of Birth: \_\_\_\_\_  
If under age eighteen (18), parent/guardian name and address, if different from above: \_\_\_\_\_

### Offender Information (use separate form for each offender)

Name: Keelen Gabehart  
Address: 9109 Elms Ct  
Home Number: 396 9951 Cell Number: \_\_\_\_\_ Email Address: \_\_\_\_\_  
Male ☒ Female ☐ Date of Birth: 8/1/02  
If under age eighteen (18), parent/guardian name and address, if different from above: \_\_\_\_\_

Kelly Gabehart  
Date of Offense: 3/22/14 Was a citation issued? Yes ☒ No ☐  
Officer(s): B. Gingerich #8220

Summary of offense and nature of damages: (attach a copy of the complaint and, if appropriate, the citation.)

AOC-JV-1 Doc. Type: Pj  
Rev 05-11 3/27/2014 12:56 pm ET  
Commonwealth of Kentucky  
Court of Justice Juv Id: 00343543  
www.KyCourts.net Page 1 of 1



**Juvenile**  
[ X ] Complaint [ ] Petition  
Status / Public Offender

JW Referral No. 056-00251550-001  
Case No.  
Court  
County JEFFERSON  
The County Attorney has reviewed the complaint and determined from the available evidence that reasonable grounds ☒ do exist to believe the alleged facts would constitute a public offense for those offenses noted below.

**Juvenile Information**

**JUVENILE INFORMATION**

In the interest of **KEELEN C. GABEHART**, a CHILD

Said juvenile resides at:  
9109 ELMS COURT  
JEFFERSONTOWN KY 40299

With telephone number of (502) 396-9951  
Attends school at \*UNKNOWN SCHOOL

The juvenile's legal mother is KELLY GABEHART  
9109 ELMS COURT JEFFERSONTOWN KY 40299 Phone: (502) 396-9951

The juvenile's legal father is  
Phone:

The parent with legal custody is KELLY GABEHART

Any Other: [ ] legal guardian other than a parent;  
[ ] nearest known adult relative if no parent or guardian is known or can be found,  
[ ] person with custody or control of the child

DOB	Gender
08/01/2002	Male
SSN	Race
--	Caucasian

CDW Diversified  
w/ RT (w/ CD)

RECEIVED

MAI 28 2014

JEFFERSON CO. ATTORNEY

**Allegation(s) are as follows**

The affiant, B. GINGERICH 8220, says that in JEFFERSON County, Kentucky, the above named juvenile unlawfully committed the offense(s) of:

**CRIMINAL MISCHIEF-2ND DEGREE** in violation of KRS 512.030 UOR code 001402 and within scope of KRS 610.010(1a,b,c,d). Affiant's grounds of belief are, that on 03/22/2014, Officers were dispatched to 9108 Old Six Mile Lane in reference to juveniles throwing wood and objects over the fence. Officers various wood blocks on the victims property and damage to his Mercury Villager KY 101 FNK hood. Officers went to neighbors behind victims house and above juvenile confessed to damage. Case related to citation #L994632. Co-defendant: Vincent Pafunt (06/27/2005).

Incident Address: 9108 SIX MILE LANE JEFFERSONTOWN KY 40299

Interested Parties:

ROBERT J BROSSART SR. VICTIM OF A PUBLIC OFFENSE 9108 OLD SIX MILE LANE JEFFERSONTOWN KY 40299

Reasonable Grounds

[X] Yes [ ] No  
[ ] Not Required

The affiant states that the foregoing allegations and Juvenile Information set forth above are true based upon information and belief.

Affiant Address:  
JEFFERSONTOWN POLICE DEPARTMENT  
10410 TAYLORSVILLE ROAD  
JEFFERSONTOWN KY 40299

Phone Number:  
267-0503

Signature of Affiant  
B. GINGERICH 8220

Law Enforcement Citation #: L994631

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Name

Title

[ ] Notification to school superintendent / principal per KRS 610.345(3)

Authorized by \_\_\_\_\_

Clerk's USE ONLY

Hearing Date \_\_\_\_\_  
Hearing Time \_\_\_\_\_ a.m. / p.m.  
Hearing Location \_\_\_\_\_

Time: \_\_\_\_\_

Date: \_\_\_\_\_

COPY DISTRIBUTION: Court CDW Files Child

THIS IS A PUBLIC RECORD ONLY IF CASE DISPOSED AS CAPITAL OFFENSE; CLASS A,B,C FELONY; OR OFFENSE INVOLVING DEADLY WEAPON.  
(See JV-31 Disposition for Court Order). VICTIM / FAMILY / REPRESENTATIVE may access this document at any time.

Principal, \*UNKNOWN SCHOOL (if so directed by Court)

PT



☒ JUVENILE OFFENDER

COMMONWEALTH OF KENTUCKY  
UNIFORM CITATION

KSP 206 (REV 2/1/06)

COURT

OFFENDER / VIOLATOR	AGENCY	Jeffersonton Police Dept. #213		RI:	KY 0561000															
	NAME (L-F-M)	Gabehart, Heelen C.		ATTN:	HOME PHONE															
	ALIAS				EMERGENCY PHONE															
	ADDRESS (RFD/STREET/APT. NO., ETC.)	9101 Elms Court		KENTUCKY RESIDENT STATUS F. <input checked="" type="checkbox"/> FULL TIME P. <input type="checkbox"/> PART TIME N. <input type="checkbox"/> NON RESIDENT																
VEHICLE	CITY	Jeffersonton	STATE	MD	ZIP	40399	MARITAL STATUS	Single												
	I.D. TYPE/STATE		I.D. NUMBER		S.S. NUMBER	460-59-1469	VICTIM'S RELATIONSHIP TO OFFENDER	neighbor												
	DATE OF BIRTH	08/01/02	SEX	<input checked="" type="checkbox"/> MALE <input type="checkbox"/> FEMALE	RACE	<input checked="" type="checkbox"/> WHITE <input type="checkbox"/> BLACK <input type="checkbox"/> AM. INDIAN <input type="checkbox"/> OR ALASKAN <input type="checkbox"/> ASIAN	ETHNIC ORIGIN	<input type="checkbox"/> HISPANIC <input checked="" type="checkbox"/> NON HISPANIC												
	PLACE OF EMPLOYMENT / OCCUPATION			CITY		STATE		HEIGHT	4'7"	WEIGHT	80 lbs	HAIR COLOR	Brown	EYE COLOR	Blue					
DATE / TIME	VEH. MAKE			VEH. TYPE			VEH. YEAR			COLOR			TOP/BOTTOM			ALCOHOL/DRUG INVOLVEMENT (SPECIFY)	<input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> UNK			
	REG. STATE			REG. YEAR			REGISTRATION NO.			VEHICLE IDENTIFIERS			MPH			IN MPH ZONE		VOL. KEY		
	VIOLATION DATE	03/22/14		VIOLATION TIME	15:30		EXACT LOCATION OF VIOLATION / ARREST				40399		B.A. RESULTS							
	DATE OF ARREST			TIME OF ARREST			MILES			DIRECTION			CITY			COUNTY OF VIOLATION	Jefferson		SECTOR	2/2
CHARGE(S)	VIOLATION CODE	ASCF	STATUTE / ORD.	CHARGES	#	PLEA	FIND-ING	FINAL VIOLATION CODE	DISPN. CODE	FINE	COSTS	FEE	JAIL / PRISON	PROB. TIME						
	01402	X	LES 512.030	CM 2nd	1			MAR 26 RECD												
					2															
					3															
COURT	COURT DATE			COURT TIME	<input type="checkbox"/> AM <input type="checkbox"/> PM		COURT LOCATION			COURT CASE NO.			DISPN. DATE			TRIAL	<input type="checkbox"/> B <input type="checkbox"/> J <input type="checkbox"/> N		CLERK'S INITIALS	
	To be signed																			
POST-ARREST COMPLAINT	POST-ARREST COMPLAINT Juvenile Petition																			
	1) Criminal Mischief 2nd																			
	Officers were dispatched to 9108 Old Six Mile Ln in reference to juveniles throwing wood & objects over the fence. Officers observed various wood blocks on the victim's property and damage to his Mercury Villager by 101 FIVE hood. Officers went to neighbors behind victim's house and above juvenile confessed to damage. Case related to citation # C994632																			
	TO BE USED AS Juvenile Petition SEE Back																			
CDL	CDL LICENSE	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		PLACARDED HAZARDOUS VEHICLE	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes															
	COMMERCIAL VEHICLE	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		CDL CLASS	<input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C															
CASE	NAME OF WITNESS	Sgt. B. Gingerich		ADDRESS	Jtown PD															
	NAME OF WITNESS	Robert J. Prosser Sr.		ADDRESS	9108 Old Six Mile Ln															
	CASE NO.	070343579		1	2		3		4											
	CARRIED FOR UCR BY CONTRIBUTOR:	<input checked="" type="checkbox"/>		OTHER AGENCY:	<input type="checkbox"/> SPECIFY		<input type="checkbox"/> IN-CAR VIDEO	<input type="checkbox"/> FINGERPRINTS		EVIDENCE HELD										
OFFICER'S SIGNATURE				BADGE / I.D. NUMBER	311 18784		ASSIGNMENT	Patrol												